

**Purdue University**  
**Purdue Memorial Union**

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**To:** Purdue Memorial Union, AR Clerk  
**From:** Purdue Student Union Board  
**Re:** Credit Card Transaction

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Purchased item (event name, # of tickets, etc.): \_\_\_\_\_  
\_\_\_\_\_

Amount: \$ \_\_\_\_\_

Card Type (circle one):    Visa    Mastercard    Discover    AMEX

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_

Cardholder Name: \_\_\_\_\_

Cardholder Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_                      State: \_\_\_\_\_                      Zip: \_\_\_\_\_

Cardholder Phone #: \_\_\_\_\_

Customer Signature: \_\_\_\_\_

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(For office use only)

Credit Account #: 200-1740-\_\_\_\_\_-4-\_\_\_\_\_

Prepared by: \_\_\_\_\_

Date submitted: \_\_\_\_/\_\_\_\_/\_\_\_\_

Completed by: \_\_\_\_\_

Date completed: \_\_\_\_/\_\_\_\_/\_\_\_\_